National Correct Coding Initiative Correct Coding Solutions, LLC A Medicare Contractor P.O. Box 907

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November 7, 2008

Ms. Jeanne Potter, RHIT, CCS-P. CHC Rising Medical Solutions 325 N. LaSalle Street, Suite 610 Chicago, IL 60654-5111

Dear Ms. Potter:

In follow-up to our conversation yesterday about your letter dated November 5, 2008 requesting clarification about the lack of National Correct Coding Initiative (NCCI) edits with CPT code 97010 (Application of a modality to 1 or more areas; hot or cold packs), I am providing this Medicare information. The Centers for Medicare and Medicaid Services (CMS) owns the NCCI and makes all decisions about its content.

CPT code 97010 is a status code "B" on the Medicare physician fee schedule which translates into "Bundled Code. Payment for covered services are always bundled into payment for other services not specified. If RVUs are shown, they are not used for Medicare payment. If these services are covered, payment for them is subsumed by the payment for the services to which they are incident (An example is a telephone call from a hospital nurse regarding care of a patient)."

Typically CMS has not included NCCI edits with any of the codes with status code "B" because their disallowance and payment denial is determined elsewhere by the processing logic based on the Medicare physician fee schedule data base. Including these column 1 CPT code / column 2 CPT code edits in the NCCI would reflect a duplicative effort, would reduce the potential volume capacity of NCCI edits, and would possibly prevent correct coding edits with a higher priority from being added to the NCCI. Other HCPCS/CPT codes with status code "B" only would be treated the same as CPT code 97010; that is, there would not typically exist NCCI edits with those codes either for the same reason. However, A4550 or Evaluation and Management (E & M) services are not at all treated the same way in the NCCI. There are different Medicare policy reasons that payment is not allowed under certain circumstances for these services.

In the National Correct Coding Initiative Policy Manual for Medicare Services, Version 14.3, Effective October 1, 2008, Introduction, Page x, published on CMS' website at http://www.cms.hhs.goy/NationalCorrectCodInItEd/

CMS states:

"The edits and policies do not include all possible combinations of correct coding edits or types of unbundling that exist. Providers are obligated to code correctly even if edits do not exist to prevent use of an inappropriate code combination."



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For any additional Medicare coverage policy applications concerning specific HCPCS/CPT codes not related to existing NCCI edits, please refer to CMS' Medicare website or contact any Medicare contractor for clarification.

I hope that this information is helpful.

Sincerely,

Linda S. Dietz, RHIA, CCS, CCS-P

Coding Specialist

National Correct Coding Initiative/Medically Unlikely Edits

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Cc: Marsha Mason-Wonsley, CMS CPT Coding Specialist